PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

2658151

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												THAN
			(Column 1)		(Column 2)		TYPE	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			65				RA	TE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASI) FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			65 minus 20=		* 4		X\$	9=	2100	ОR	X\$18=	
INDEPENDENT CLAIMS			6 minus 3 =		* 3		X4	2=	126.	OR	X84=	
МО	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+14	10=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in column 2		TO	ΓAL	906.	ОH	TOTAL	
	С	LAIMS AS A	MENDED - PART II				- /			8	OTHER	THAN
		(Column 1)		(Colur		(Column 3) SMALL I			ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18≈	
	Independent	*	Minus	***		=	X4	2=		OR	X84=	
L	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDENT	CLAIM		+14	0=		OR	+280=	
	(O. I							DTAL		OD	TOTAL	
								FEE		OR	ADDIT. FEE	-
		(Column 1) CLAIMS		(Colur		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE	3	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	nt * Minus *** ESENTATION OF MULTIPLE DEPENDENT CLA			=	X4:	2=		OR	X84=		
_	FIRST PRESE	NIATION OF ME	JUITPLE DEF	PENDENI	CLAIM]	+14	0=		OR	+280=	
								OTAL FEE		OR	TOTAL ADDIT, FEE	
		(Column 3)										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4:				X84=	
	FIRST PRESENTATION OF MI		ULTIPLE DEPENDENT		CLAIM		-^*			OR	∧04≈ ————————————————————————————————————	
*	f the entry in colu	mn 1 is less than th	ne entry in colu	ımn 2 weita	"O" in col	uma 3	+14			OR	+280=	
**	If the "Highest Nu If the "Highest Nu	mber Previously Pa mber Previously P	aid For" IN THI aid For" IN THI	S SPACE IS	s less thai s less tha	n 20, enter "20." n 3. enter "3."	ADDIT.	_			TOTAL ADDIT. FEE	
1	i ne "Highest Nur	nber Previously Pa	o For" (Total o	rind pendo	ent) is the	highest number	found in t	h apr	propriate box	in col	umn 1.	